

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

Arizona Republican Party

ADDRESS (number and street)

3501 North 24th Street

☐Check if different
than previously
reported. (ACC)

Phoenix

AZ

85016

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00008227

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report (Q1)☐July 15
Quarterly Report (Q2)☐October 15
Quarterly Report (Q3)☐January 31
Quarterly Report (YE)☐July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☒

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the
State of(d) 30-Day
Post-Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

06

01

2009

through

06

30

2009

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Timothy Lee

Signature of Treasurer

Electronically Filed by Timothy Lee

Date

07

20

2009

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 12/2004)

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

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Write or Type Committee Name
Arizona Republican Party

Report Covering the Period: From:

M	M
0	6

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1	2009	30370.59
(b) Cash on Hand at Beginning of Reporting Period	43010.53	
(c) Total Receipts (from Line 19)	54571.32	249309.12
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	97581.85	279679.71
7. Total Disbursements (from Line 31)	37856.21	219954.07
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	59725.64	59725.64
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

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Write or Type Committee Name
Arizona Republican Party

Report Covering the Period:

From:

M	M
0	6

D	D
0	1

Y	Y	Y	Y
2	0	0	9

To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	9

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	36000.00	79128.42
(ii) Unitemized	18585.44	152391.15
(iii) TOTAL (add Lines 11(a)(i) and (ii)	54585.44	231519.57
(b) Political Party Committees	0.88	0.88
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	54586.32	231520.45
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	4960.15
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	-15.00	-15.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	12843.52
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	12843.52
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	54571.32	249309.12
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	54571.32	236465.60

DETAILED SUMMARY PAGE

of Disbursements

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FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)			
(i) Federal Share.....	2293.09	7224.22	
(ii) Non-Federal Share.....	8626.30	27176.76	
(b) Other Federal Operating Expenditures.....	17501.27	130281.33	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤	28420.66	164682.31	
22. Transfers to Affiliated/Other Party Committees.....	0.00	5043.52	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00	
24. Independent Expenditure (use Schedule E)	0.00	0.00	
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00	
26. Loan Repayments Made.....	0.00	0.00	
27. Loans Made.....	0.00	0.00	
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees	0.00	0.00	
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees (such as PACs)	0.00	0.00	
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00	
29. Other Disbursements.....	0.00	3500.00	
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share	0.00	0.00	
(ii) "Levin" Share	0.00	0.00	
(b) Federal Election Activity Paid Entirely With Federal Funds	9435.55	46728.24	
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	9435.55	46728.24	
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	37856.21	219954.07	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	29229.91	192777.31	

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	54586.32	231520.45
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	54586.32	231520.45
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	19794.36	137505.55
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	4960.15
38. Net Operating Expenditures (subtract Line 37 from Line 36)	19794.36	132545.40

SCHEDULE L (FEC Form 3X)

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AGGREGATION PAGE: LEVIN FUNDS

Transaction ID: SL1

NAME OF COMMITTEE (In Full)
Arizona Republican Party

NAME OF ACCOUNT
LEVIN ACCO

	COLUMN A TOTAL THIS PERIOD	COLUMN B YEAR-TO-DATE
1. RECEIPTS FROM PERSONS		
a. Itemized..... (Use Schedule L-A)	0.00	0.00
b. Unitemized.....	0.00	0.00
c. Total.....	0.00	0.00
2. OTHER RECEIPTS.....	0.00	2343.52
3. TOTAL RECEIPTS..... (Add Lines 1c and 2)	0.00	2343.52
4. TRANSFERS TO FEDERAL OR ALLOCATION ACCOUNT (Use Schedule L-B)		
a. Voter Registration.....	0.00	0.00
b. Voter ID.....	0.00	0.00
c. GOTV.....	0.00	0.00
d. Generic Campaign.....	0.00	0.00
e. Total.....	0.00	0.00
5. OTHER DISBURSEMENTS.....	0.00	8439.33
6. TOTAL DISBURSEMENTS..... (Add Lines 4e and 5)	0.00	8439.33
7. BEGINNING CASH ON HAND..... (for Column B, use cash as of January 1st)	2483.52	8579.33
8. RECEIPTS..... (from Line 3)	0.00	2343.52
9. SUBTOTAL..... (Add Lines 7 and 8)	2483.52	10922.85
10. DISBURSEMENTS..... (From Line 6)	0.00	8439.33
11. ENDING CASH ON HAND..... (Subtract Line 10 From Line 9)	2483.52	2483.52

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 36

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Arizona Republican Party

A.

Full Name (Last, First, Middle Initial)

Joseph Abate

Mailing Address 3150 N Manor Drive West

City

Phoenix

State

AZ

Zip Code

85014-5525

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 5 / 2 0 0 9

Transaction ID: 90618.C86974

Amount of Each Receipt this Period

300.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Lloyd Alaback

Mailing Address PO Box 3797

City

Wickenburg

State

AZ

Zip Code

85358-3797

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 5 / 2 0 0 9

Transaction ID: 90618.C87108

Amount of Each Receipt this Period

200.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Sharon Ansbaugh

Mailing Address 10040 E Happy Valley Rd., Unit 100

City

Scottsdale

State

AZ

Zip Code

85255-8401

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 2 / 2 0 0 9

Transaction ID: 90618.C86866

Amount of Each Receipt this Period

250.00

Receipt

SUBTOTAL of Receipts This Page (optional)

750.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 36

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Arizona Republican Party

A.

Full Name (Last, First, Middle Initial)

Aaron Berkowitz

Mailing Address 1425 E Villa Rita Dr

City

Phoenix

State

AZ

Zip Code

85022-1298

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 5 / 2 0 0 9

Transaction ID: 90618.C87114

Amount of Each Receipt this Period

100.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Trish Bharwada

Mailing Address 6211 N. 74th Pl.

City

Scottsdale

State

AZ

Zip Code

85250-5502

FEC ID number of contributing
federal political committee.

C

Name of Employer
Dow Chemical Co.

Occupation

Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 2 / 2 0 0 9

Transaction ID: 90618.C86819

Amount of Each Receipt this Period

100.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Lynn Biddison

Mailing Address PO Box 69280

City

Tucson

State

AZ

Zip Code

85737-0013

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 1 / 2 0 0 9

Transaction ID: 90618.C86733

Amount of Each Receipt this Period

50.00

Receipt

SUBTOTAL of Receipts This Page (optional)

250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 36

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Arizona Republican Party

A.

Full Name (Last, First, Middle Initial)

Gregory Blank

Mailing Address 20368 N. 93rd Pl.

City

Scottsdale

State

AZ

Zip Code

85255-6619

FEC ID number of contributing
federal political committee.

C

Name of Employer
Summit Holdings, Inc.Occupation
Investments

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 1 / 2 0 0 9

Transaction ID: 90618.C87028

Amount of Each Receipt this Period

250.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Marvin Borsand

Mailing Address 5338 E Arcadia Ln

City

Phoenix

State

AZ

Zip Code

85018

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information RequestedOccupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 5 / 2 0 0 9

Transaction ID: 90618.C86979

Amount of Each Receipt this Period

600.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Wendell Clements

Mailing Address 922 S. Tigres Trail

City

Cottonwood

State

AZ

Zip Code

86326-6348

FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 5 / 2 0 0 9

Transaction ID: 90618.C86896

Amount of Each Receipt this Period

100.00

Receipt

SUBTOTAL of Receipts This Page (optional)

950.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 36

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Arizona Republican Party

A.

Full Name (Last, First, Middle Initial)

Muriel Coffman

Mailing Address 11603 N 86th St

City

Scottsdale

State

AZ

Zip Code

85260-5703

FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 5 / 2 0 0 9

Transaction ID: 90618.C86909

Amount of Each Receipt this Period

100.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Victor Daniels

Mailing Address 2515 S College Ave, #14

City

Tempe

State

AZ

Zip Code

85282

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information RequestedOccupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 5 / 2 0 0 9

Transaction ID: 90717.C87205

Amount of Each Receipt this Period

800.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Alan Davis

Mailing Address PO Box 2121

City

Tubac

State

AZ

Zip Code

85646-2121

FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 2 3 / 2 0 0 9

Transaction ID: 90717.C87269

Amount of Each Receipt this Period

100.00

Receipt

SUBTOTAL of Receipts This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 36

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Arizona Republican Party

A.

Full Name (Last, First, Middle Initial)

Sandra Doty

Mailing Address 10401 E Flintlock Dr

City

Sun Lakes

State

AZ

Zip Code

85248-9291

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 2 / 2 0 0 9

Transaction ID: 90618.C86816

Amount of Each Receipt this Period

100.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Albert Face

Mailing Address 1961 W 13th Pl

City

Yuma

State

AZ

Zip Code

85364-4304

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 5 / 2 0 0 9

Transaction ID: 90618.C86992

Amount of Each Receipt this Period

100.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Norman Fee

Mailing Address 7209 E. McDonald Drive, # 38

City

Scottsdale

State

AZ

Zip Code

85250-6053

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 5 / 2 0 0 9

Transaction ID: 90618.C86971

Amount of Each Receipt this Period

300.00

Receipt

SUBTOTAL of Receipts This Page (optional)

500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 36

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Arizona Republican Party

A.

Full Name (Last, First, Middle Initial)

James Fetzer

Mailing Address 4681 S. Placita Dos Pajaritos

City

Tucson

State

AZ

Zip Code

85730-5812

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 5 / 2 0 0 9

Transaction ID: 90618.C86972

Amount of Each Receipt this Period

1000.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Robert Graham

Mailing Address 4833 E Cielo Grande Ave

City

Phoenix

State

AZ

Zip Code

85054-6123

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 2 6 / 2 0 0 9

Transaction ID: 90717.C87286

Amount of Each Receipt this Period

15000.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Evans Guidroz

Mailing Address 2380 El Camino Real

City

Sierra Vista

State

AZ

Zip Code

85635-5905

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation
Rancher

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 5 / 2 0 0 9

Transaction ID: 90618.C86939

Amount of Each Receipt this Period

300.00

Receipt

SUBTOTAL of Receipts This Page (optional)

16300.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Arizona Republican Party

A.

Full Name (Last, First, Middle Initial)

Jerome Harden

Mailing Address 5515 E Cannon Dr

City

Scottsdale

State

AZ

Zip Code

85253-1158

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 6 / 2 0 0 9

Transaction ID: 90717.C87227

Amount of Each Receipt this Period

500.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Jeffrey Hill

Mailing Address 43 E Rose Ln

City

Phoenix

State

AZ

Zip Code

85012-1240

FEC ID number of contributing
federal political committee.

C

Name of Employer
Peds CritCare Az

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 5 / 2 0 0 9

Transaction ID: 90618.C86995

Amount of Each Receipt this Period

100.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Bliss Homes

Mailing Address 18207 N Conestoga Dr

City

Sun City

State

AZ

Zip Code

85373-1772

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 5 / 2 0 0 9

Transaction ID: 90618.C86926

Amount of Each Receipt this Period

250.00

Receipt

SUBTOTAL of Receipts This Page (optional)

850.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 36

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Arizona Republican Party

A.

Full Name (Last, First, Middle Initial)

Thomas Husband

Mailing Address 5520 E San Miguel

City

Paradise Valley

State

AZ

Zip Code

85253-5137

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 1 / 2 0 0 9

Transaction ID: 90618.C86694

Amount of Each Receipt this Period

600.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Gila River Indian Community

Mailing Address PO Box 2160

City

Sacaton

State

AZ

Zip Code

85247

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

12000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 9 / 2 0 0 9

Transaction ID: 90618.C87070

Amount of Each Receipt this Period

10000.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Infini, LLC

Mailing Address 7473 E Osborn Rd

City

Scottsdale

State

AZ

Zip Code

85251

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 2 4 / 2 0 0 9

Transaction ID: 90717.C87519

Amount of Each Receipt this Period

300.00

Receipt

SUBTOTAL of Receipts This Page (optional)

10900.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 36

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Arizona Republican Party

A.

Full Name (Last, First, Middle Initial)

Willis Jenney

Mailing Address 5101 Camino Alisa

City

Tucson

State

AZ

Zip Code

85718-4603

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 1 / 2 0 0 9

Transaction ID: 90618.C86703

Amount of Each Receipt this Period

500.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Vern Jensen

Mailing Address 1935 Cottonwood Ln.

City

Mohave Valley

State

AZ

Zip Code

86440-8535

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 5 / 2 0 0 9

Transaction ID: 90717.C87207

Amount of Each Receipt this Period

100.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Eugene Lewis

Mailing Address 4428 W Laurie Ln

City

Glendale

State

AZ

Zip Code

85302-6623

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 2 / 2 0 0 9

Transaction ID: 90618.C86818

Amount of Each Receipt this Period

100.00

Receipt

SUBTOTAL of Receipts This Page (optional)

700.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 36

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Arizona Republican Party

A.

Full Name (Last, First, Middle Initial)

John Mangum

Mailing Address 2218 Encanto Dr NE

City

Phoenix

State

AZ

Zip Code

85007

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 5 / 2 0 0 9

Transaction ID: 90618.C86977

Amount of Each Receipt this Period

300.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Janet McGee

Mailing Address 18607 E. Hierro Cir.

City

Rio Verde

State

AZ

Zip Code

85263-5096

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: 90717.C87362

Amount of Each Receipt this Period

225.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Ramon Montes

Mailing Address 16240 N. 56th Way

City

Scottsdale

State

AZ

Zip Code

85254-9212

FEC ID number of contributing
federal political committee.

C

Name of Employer
Banner Health

Occupation

Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 0 / 2 0 0 9

Transaction ID: 90618.C87042

Amount of Each Receipt this Period

100.00

Receipt

SUBTOTAL of Receipts This Page (optional)

625.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER: PAGE 17 / 36

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Arizona Republican Party

A.

Full Name (Last, First, Middle Initial)

Angela Mosher

Mailing Address 4751 N. 15th St.

City

Phoenix

State

AZ

Zip Code

85014-3707

FEC ID number of contributing
federal political committee.

C

Name of Employer
Mosher Admin. Ser. Inc.

Occupation
Insurance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 5 / 2 0 0 9

Transaction ID: 90618.C86905

Amount of Each Receipt this Period

100.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Glenn Murray

Mailing Address 1385 Albino Trl

City

Dewey

State

AZ

Zip Code

86327-5101

FEC ID number of contributing
federal political committee.

C

Name of Employer
Physician

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 0 / 2 0 0 9

Transaction ID: 90618.C87045

Amount of Each Receipt this Period

50.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Roger Neumeister

Mailing Address 10314 Charter Oak Dr

City

Sun City

State

AZ

Zip Code

85351-1828

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 5 / 2 0 0 9

Transaction ID: 90618.C86936

Amount of Each Receipt this Period

250.00

Receipt

SUBTOTAL of Receipts This Page (optional)

400.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Arizona Republican Party

A.

Full Name (Last, First, Middle Initial)

Jack Obadia

Mailing Address 8702 N 65th St

City

Paradise Valley

State

AZ

Zip Code

85253-1885

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 5 / 2 0 0 9

Transaction ID: 90618.C86980

Amount of Each Receipt this Period

300.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Mildred Olegar

Mailing Address 10909 Amber Trail

City

Sun City

State

AZ

Zip Code

85351-1048

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 5 / 2 0 0 9

Transaction ID: 90618.C87103

Amount of Each Receipt this Period

100.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Mildred Olegar

Mailing Address 10909 Amber Trail

City

Sun City

State

AZ

Zip Code

85351-1048

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: 90717.C87379

Amount of Each Receipt this Period

100.00

Receipt

SUBTOTAL of Receipts This Page (optional)

500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Arizona Republican Party

A.

Full Name (Last, First, Middle Initial)

Corinne Quayle

Mailing Address 1665 S Maguire Dr

City

Wickenburg

State

AZ

Zip Code

85390-3139

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 5 / 2 0 0 9

Transaction ID: 90717.C87209

Amount of Each Receipt this Period

200.00

Receipt

B.

Full Name (Last, First, Middle Initial)

A Chasby Sacks

Mailing Address 2042 E Glenn Dr

City

Phoenix

State

AZ

Zip Code

85020

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 5 / 2 0 0 9

Transaction ID: 90618.C86976

Amount of Each Receipt this Period

300.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Thomas Schumacher

Mailing Address 16842 W Desert Blossom Way

City

Surprise

State

AZ

Zip Code

85387-7233

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 5 / 2 0 0 9

Transaction ID: 90618.C87002

Amount of Each Receipt this Period

100.00

Receipt

SUBTOTAL of Receipts This Page (optional)

600.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 20 / 36

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Arizona Republican Party

A.

Full Name (Last, First, Middle Initial)

Theora Shelley

Mailing Address 10624 E Terra Dr

City

Scottsdale

State

AZ

Zip Code

85258-6118

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 0 9

Transaction ID: 90618.C86723

Amount of Each Receipt this Period

50.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Tom Smith

Mailing Address 4204 N 57th Way

City

Phoenix

State

AZ

Zip Code

85018-4608

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 0 9

Transaction ID: 90618.C86715

Amount of Each Receipt this Period

100.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Harlan Stratton

Mailing Address 9398 E Calle De Las Brisas

City

Scottsdale

State

AZ

Zip Code

85255-4336

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

470.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 5 / 2 0 0 9

Transaction ID: 90618.C86908

Amount of Each Receipt this Period

100.00

Receipt

SUBTOTAL of Receipts This Page (optional)

250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER: PAGE 21 / 36

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Arizona Republican Party

A.

Full Name (Last, First, Middle Initial)

Richard Taubert

Mailing Address 6515 N La Paloma Este

City

Phoenix

State

AZ

Zip Code

85014-1339

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 1 / 2 0 0 9

Transaction ID: 90618.C86727

Amount of Each Receipt this Period

50.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Ann Tewksbury

Mailing Address 1059 Evergreen Rd

City

Prescott

State

AZ

Zip Code

86303-3574

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 5 / 2 0 0 9

Transaction ID: 90618.C86945

Amount of Each Receipt this Period

200.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Linda Tripp

Mailing Address 9290 E. Thompson Peak Pkwy., Unit

City

Scottsdale

State

AZ

Zip Code

85255-4519

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: 90717.C87318

Amount of Each Receipt this Period

200.00

Receipt

SUBTOTAL of Receipts This Page (optional)

450.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 / 36

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Arizona Republican Party

A.

Full Name (Last, First, Middle Initial)

Conrad Tvedt

Mailing Address 21220 N. Shamrock Dr.

City

Sun City West

State

AZ

Zip Code

85375-5461

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 5 / 2 0 0 9

Transaction ID: 90618.C86998

Amount of Each Receipt this Period

50.00

Receipt

B.

Full Name (Last, First, Middle Initial)

J. Ronald White

Mailing Address 2595 Turkey Track St.

City

Kingman

State

AZ

Zip Code

86401-7331

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation
Land Surveyor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 1 / 2 0 0 9

Transaction ID: 90618.C87022

Amount of Each Receipt this Period

125.00

Receipt

C.

Full Name (Last, First, Middle Initial)

J W Wilhoit

Mailing Address 4424 E Valley Vista Ln

City

Paradise Valley

State

AZ

Zip Code

85253-4080

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 9 / 2 0 0 9

Transaction ID: 90618.C87078

Amount of Each Receipt this Period

500.00

Receipt

SUBTOTAL of Receipts This Page (optional)

675.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 36

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Arizona Republican Party

A.

Full Name (Last, First, Middle Initial)

Stephen Wilson

Mailing Address 318 W Roosevelt St

City

Phoenix

State

AZ

Zip Code

85003

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐
☐

Primary

☐

General

Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	5		2	0	0	9

Transaction ID: 90618.C87017

Amount of Each Receipt this Period

300.00

Receipt

SUBTOTAL of Receipts This Page (optional)

300.00

TOTAL This Period (last page this line number only)

36000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 / 36

(check only one)

☐ 11a ☒ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Arizona Republican Party

A.

Full Name (Last, First, Middle Initial)

Arizona Republican Party - Federal

Mailing Address 3501 N 24th St

City

Phoenix

State

AZ

Zip Code

85016-6691

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

0.88

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 6 / 2 0 0 9

Transaction ID: 90717.C87236

Amount of Each Receipt this Period

0.88

Receipt

SUBTOTAL of Receipts This Page (optional)

0.88

TOTAL This Period (last page this line number only)

0.88

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 / 36

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☒ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Arizona Republican Party

A.

Full Name (Last, First, Middle Initial)

Gustav Haussler

Mailing Address 3475 N. Sabin Brown Rd.

City

Wickenburg

State

AZ

Zip Code

85390-1019

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation

Air Craft Painter

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

-15.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 9 / 2 0 0 9

Transaction ID: 90618.C87124

Amount of Each Receipt this Period

-15.00

Refund of Contribution Made

SUBTOTAL of Receipts This Page (optional)

-15.00

TOTAL This Period (last page this line number only)

-15.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 26 / 36

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
Arizona Republican Party

A. Full Name (Last, First, Middle Initial) Auto Owners	Transaction ID: 90717.E10271 Date of Disbursement																				
Mailing Address P.O. Box 30078	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		0	1		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		0	1		2	0	0	9												
City Lansing State MI Zip Code 48909-75 Purpose of Disbursement Void prior period chekc Candidate Name	Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 5px; text-align: right;">-500.90</div>																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	VOID PRIOR PERIOD CHEKC																				
B. Full Name (Last, First, Middle Initial) M & I Thunderbird Bank	Transaction ID: 90720.E10272 Date of Disbursement																				
Mailing Address 1 E Camelback Rd	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		0	1		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		0	1		2	0	0	9												
City Phoenix State AZ Zip Code 85012-3224 Purpose of Disbursement Merchant account fees Candidate Name	Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 5px; text-align: right;">143.33</div>																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	MERCHANT ACCOUNT FEES																				
C. Full Name (Last, First, Middle Initial) M & I Thunderbird Bank	Transaction ID: 90717.E10257 Date of Disbursement																				
Mailing Address 1 E Camelback Rd	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		0	2		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		0	2		2	0	0	9												
City Phoenix State AZ Zip Code 85012-3224 Purpose of Disbursement Credit card payment see below Candidate Name	Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 5px; text-align: right;">337.42</div>																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	CREDIT CARD PAYMENT SEE BELOW																				

SUBTOTAL of Disbursements This Page (optional)

-20.15

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 27 / 36

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Arizona Republican Party

A. Full Name (Last, First, Middle Initial) Pizza Hut	Transaction ID: 90717.E10263 Date of Disbursement																				
Mailing Address 3602 E Thomas Rd.Rd	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	5		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		1	5		2	0	0	9												
City Phoenix State AZ Zip Code 85018-	Amount of Each Disbursement this Period																				
Purpose of Disbursement Food for office	<table border="1"> <tr> <td colspan="10">227.78</td> </tr> </table>	227.78																			
227.78																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
[MEMO ITEM] MEMO: FOOD FOR OFFICE																					
B. Full Name (Last, First, Middle Initial) M & I Thunderbird Bank	Transaction ID: 90717.E10256 Date of Disbursement																				
Mailing Address 1 E Camelback Rd	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		0	2		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		0	2		2	0	0	9												
City Phoenix State AZ Zip Code 85012-3224	Amount of Each Disbursement this Period																				
Purpose of Disbursement Credit card payment see below	<table border="1"> <tr> <td colspan="10">477.20</td> </tr> </table>	477.20																			
477.20																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
CREDIT CARD PAYMENT SEE BELOW																					
C. Full Name (Last, First, Middle Initial) US Airways	Transaction ID: 90717.E10262 Date of Disbursement																				
Mailing Address via internet	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		0	5		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		0	5		2	0	0	9												
City State Zip Code	Amount of Each Disbursement this Period																				
Purpose of Disbursement Travel	<table border="1"> <tr> <td colspan="10">477.20</td> </tr> </table>	477.20																			
477.20																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
[MEMO ITEM] MEMO: TRAVEL																					

SUBTOTAL of Disbursements This Page (optional)

477.20

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Arizona Republican Party

A. Full Name (Last, First, Middle Initial) M & I Thunderbird Bank Mailing Address 1 E Camelback Rd	Transaction ID: 90720.E10277 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		3	0		2	0	0	9										
M	M	/	D	D	/	Y	Y	Y	Y																						
0	6		3	0		2	0	0	9																						
City Phoenix State AZ Zip Code 85012-3224 Purpose of Disbursement Merchant account fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <table border="1"> <tr> <td colspan="10">268.64</td> </tr> </table> MERCHANT ACCOUNT FEES	268.64																													
268.64																															
B. Full Name (Last, First, Middle Initial) M & I Thunderbird Bank Mailing Address 1 E Camelback Rd City Phoenix State AZ Zip Code 85012-3224 Purpose of Disbursement Service charge Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90720.E10278 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td colspan="10">90.83</td> </tr> </table> SERVICE CHARGE	M	M	/	D	D	/	Y	Y	Y	Y	0	6		3	0		2	0	0	9	90.83									
M	M	/	D	D	/	Y	Y	Y	Y																						
0	6		3	0		2	0	0	9																						
90.83																															
C. Full Name (Last, First, Middle Initial) Brett Mecum Mailing Address 2936 W Gregg Dr City Chandler State AZ Zip Code 85224- Purpose of Disbursement Reimbursement see below Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90717.E10260 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td colspan="10">529.40</td> </tr> </table> REIMBURSEMENT SEE BELOW	M	M	/	D	D	/	Y	Y	Y	Y	0	6		0	1		2	0	0	9	529.40									
M	M	/	D	D	/	Y	Y	Y	Y																						
0	6		0	1		2	0	0	9																						
529.40																															

SUBTOTAL of Disbursements This Page (optional)

888.87

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 29 / 36

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Arizona Republican Party

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Travelocity</p> <p>Mailing Address via internet</p> <p>City State Zip Code</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 90717.E10261</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="429.40"/></p> <p>[MEMO ITEM] MEMO: TRAVEL</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Petition Pros</p> <p>Mailing Address Attn: Diane Burns 908 E. Derbe Dr.</p> <p>City Tepme State AZ Zip Code 85284-</p> <p>Purpose of Disbursement Voter registration consulting</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 90717.E10254</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="6625.00"/></p> <p>VOTER REGISTRATION CONSUL- TING</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Strategic Fundraising, Inc.</p> <p>Mailing Address 7591 9th Street North</p> <p>City Saint Paul State MN Zip Code 55128-</p> <p>Purpose of Disbursement Party telemarketing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 90717.E10259</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="1"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="9364.00"/></p> <p>PARTY TELEMARKETING</p>

SUBTOTAL of Disbursements This Page (optional)

15989.00

TOTAL This Period (last page this line number only)

17334.92

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 30 / 36

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Arizona Republican Party

A.	Full Name (Last, First, Middle Initial) Aetna	Transaction ID: 90720.E10273																				
	Mailing Address 7720 N. 16th Street, #400	Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		3	0		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y													
0	6		3	0		2	0	0	9													
	City Phoenix State AZ Zip Code 85020-	Amount of Each Disbursement this Period																				
	<table border="1"> <tr> <td>Purpose of Disbursement Employee benefits</td> <td rowspan="2"><input type="text"/></td> </tr> <tr> <td>Candidate Name</td> </tr> </table>	Purpose of Disbursement Employee benefits	<input type="text"/>	Candidate Name	<table border="1"> <tr> <td>860.00</td> </tr> </table>	860.00																
Purpose of Disbursement Employee benefits	<input type="text"/>																					
Candidate Name																						
860.00																						
	<table border="1"> <tr> <td>Office Sought:</td> <td>Disbursement For:</td> </tr> <tr> <td> <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President </td> <td> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </td> </tr> <tr> <td>State: District:</td> <td></td> </tr> </table>	Office Sought:	Disbursement For:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:		EMPLOYEE BENEFITS														
Office Sought:	Disbursement For:																					
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
State: District:																						
B.	Full Name (Last, First, Middle Initial) American Community	Transaction ID: 90717.E10252																				
	Mailing Address 39201 Seven Mile Road	Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		0	1		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y													
0	6		0	1		2	0	0	9													
	City Livonia State MI Zip Code 48152-10	Amount of Each Disbursement this Period																				
	<table border="1"> <tr> <td>Purpose of Disbursement FEA Health insurance</td> <td rowspan="2"><input type="text"/></td> </tr> <tr> <td>Candidate Name</td> </tr> </table>	Purpose of Disbursement FEA Health insurance	<input type="text"/>	Candidate Name	<table border="1"> <tr> <td>1109.08</td> </tr> </table>	1109.08																
Purpose of Disbursement FEA Health insurance	<input type="text"/>																					
Candidate Name																						
1109.08																						
	<table border="1"> <tr> <td>Office Sought:</td> <td>Disbursement For:</td> </tr> <tr> <td> <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President </td> <td> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </td> </tr> <tr> <td>State: District:</td> <td></td> </tr> </table>	Office Sought:	Disbursement For:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:		FEA HEALTH INSURANCE														
Office Sought:	Disbursement For:																					
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
State: District:																						
C.	Full Name (Last, First, Middle Initial) BMS Payroll	Transaction ID: 90720.E10279																				
	Mailing Address 18441 N. 25th Ave Suite 103	Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	5		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y													
0	6		1	5		2	0	0	9													
	City Phoenix State AZ Zip Code 85023-	Amount of Each Disbursement this Period																				
	<table border="1"> <tr> <td>Purpose of Disbursement Payroll taxes</td> <td rowspan="2"><input type="text"/></td> </tr> <tr> <td>Candidate Name</td> </tr> </table>	Purpose of Disbursement Payroll taxes	<input type="text"/>	Candidate Name	<table border="1"> <tr> <td>1234.62</td> </tr> </table>	1234.62																
Purpose of Disbursement Payroll taxes	<input type="text"/>																					
Candidate Name																						
1234.62																						
	<table border="1"> <tr> <td>Office Sought:</td> <td>Disbursement For:</td> </tr> <tr> <td> <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President </td> <td> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </td> </tr> <tr> <td>State: District:</td> <td></td> </tr> </table>	Office Sought:	Disbursement For:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:		PAYROLL TAXES														
Office Sought:	Disbursement For:																					
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
State: District:																						

SUBTOTAL of Disbursements This Page (optional)

3203.70

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
Arizona Republican Party

<p>A.</p> <p>Full Name (Last, First, Middle Initial) BMS Payroll</p> <p>Mailing Address 18441 N. 25th Ave Suite 103</p> <p>City Phoenix State AZ Zip Code 85023-</p> <p>Purpose of Disbursement Payroll taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 90720.E10280 Date of Disbursement <div> <div>06</div> <div>30</div> <div>2009</div> </div> </p> <p>Amount of Each Disbursement this Period <div>1234.62</div> </p> <p>PAYROLL TAXES</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Brett Mecum</p> <p>Mailing Address 2936 W Gregg Dr</p> <p>City Chandler State AZ Zip Code 85224-</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 90717.E10265 Date of Disbursement <div> <div>06</div> <div>01</div> <div>2009</div> </div> </p> <p>Amount of Each Disbursement this Period <div>2353.71</div> </p> <p>PAYROLL</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Brett Mecum</p> <p>Mailing Address 2936 W Gregg Dr</p> <p>City Chandler State AZ Zip Code 85224-</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 90717.E10264 Date of Disbursement <div> <div>06</div> <div>15</div> <div>2009</div> </div> </p> <p>Amount of Each Disbursement this Period <div>2353.71</div> </p> <p>PAYROLL</p>

SUBTOTAL of Disbursements This Page (optional)

5942.04

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

Arizona Republican Party

A. Full Name (Last, First, Middle Initial)
Premier Access Insurance Company

Mailing Address P.O. Box 659020

City Sacramento State CA Zip Code 95865-9020

Purpose of Disbursement
FEA Employee insurance

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90717.E10258

Date of Disbursement

/

Amount of Each Disbursement this Period

190.50

FEA EMPLOYEE INSURANCE

B. Full Name (Last, First, Middle Initial)
Premier Access Insurance Company

Mailing Address P.O. Box 659020

City Sacramento State CA Zip Code 95865-9020

Purpose of Disbursement
Employee insurance

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90720.E10274

Date of Disbursement

/

Amount of Each Disbursement this Period

88.56

EMPLOYEE INSURANCE

SUBTOTAL of Disbursements This Page (optional)

279.06

TOTAL This Period (last page this line number only)

9424.80

METHOD OF ALLOCATION FOR:

- **SHARED FEDERAL AND NONFEDERAL ADMINISTRATIVE, GENERIC VOTER DRIVE AND EXEMPT ACTIVITY COSTS**
- **SHARED FEDERAL AND LEVIN FUNDS FEDERAL ELECTION ACTIVITY EXPENSES** (State, District and Local Party Committees Only)
- **ALLOCATED PUBLIC COMMUNICATIONS THAT REFER TO ANY POLITICAL PARTY (BUT NOT A CANDIDATE)**(Seperate Segregated Funds And Nonconnected Committees Only)

NAME OF COMMITTEE (In Full)

Arizona Republican Party

USE ONLY ONE SECTION, A or B**A. State and Local Party Committees****Fixed Percentage (select one)**

- _____ Presidential-Only Election Year (28% Federal)
- _____ Presidential and Senate Election Year (36% Federal)
- X Senate-Only Election Year (21% Federal)
- _____ Non-Presidential and Non-Senate Election Year (15% Federal)

B. Separate Segregated Funds and Nonconnected Committees**Flat Minimum Federal Percentage**If the committee will allocate using the flat minimum percentage of 50% federal funds, check ☐**or**

If the committee is spending more than 50% federal funds, indicate ratio below

Federal..... %Nonfederal..... %

This ratio applies to (check all that apply):

Administrative ☐ Generic Voter Drive ☐ Public Communications Referencing Party Only ☐

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 34 / 36
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Arizona Republican Party

A. Full Name (Last, First, Middle Initial)

CBIZ MHM, LLC

Mailing Address

175 South West Temple Suite 650

City State Zip Code

Salt Lake UT 84101-

Purpose of Disbursement:
FEC Reporting and accountingCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 3

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

29097.69

Date M M / D D / Y Y Y Y
0 6 / 0 5 / 2 0 0 9

Transaction ID: H490717.E10253

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

315.00

1185.00

1500.00

B. Full Name (Last, First, Middle Initial)

Matthew Roberts

Mailing Address

3501 N 24th Street

City State Zip Code

Phoenix AZ 85016-

Purpose of Disbursement:
Payroll less 25% federalCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 3

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

31643.73

Date M M / D D / Y Y Y Y
0 6 / 1 5 / 2 0 0 9

Transaction ID: H490717.E10266

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

332.00

1248.95

1580.95

C. Full Name (Last, First, Middle Initial)

Matthew Roberts

Mailing Address

3501 N 24th Street

City State Zip Code

Phoenix AZ 85016-

Purpose of Disbursement:
Payroll less 25% federalCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 3

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

26106.85

Date M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 0 9

Transaction ID: H490717.E10267

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

332.00

1248.95

1580.95

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

979.00

3682.90

4661.90

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 35 / 36
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Arizona Republican Party

A. Full Name (Last, First, Middle Initial)

Michelle Schmitt

Mailing Address

3501 North 24th Street

City State Zip Code

Phoenix

AZ

85016-

Purpose of Disbursement:
Payroll less 25% federalCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 3

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

27597.69

Date M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 0 9

Transaction ID: H490717.E10268

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

313.08

1177.76

1490.84

B. Full Name (Last, First, Middle Initial)

Michelle Schmitt

Mailing Address

3501 North 24th Street

City State Zip Code

Phoenix

AZ

85016-

Purpose of Disbursement:
Payroll less 25%Category/
TypeActivity or Event Identifier:
ADMINISTRATION B 3

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

33134.57

Date M M / D D / Y Y Y Y
0 6 / 1 5 / 2 0 0 9

Transaction ID: H490717.E10269

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

313.08

1177.76

1490.84

C. Full Name (Last, First, Middle Initial)

Teresa Martinez

Mailing Address

3501 N 24th Street

City State Zip Code

Phoenix

AZ

85016-

Purpose of Disbursement:
Payroll less 25% federalCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 3

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

24525.90

Date M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 0 9

Transaction ID: H490717.E10270

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

219.31

825.00

1044.31

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

845.47

3180.52

4025.99

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 36 / 36
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Arizona Republican Party

A. Full Name (Last, First, Middle Initial)
BMS Payroll

Mailing Address

18441 N. 25th Ave Suite 103

City State Zip Code
Phoenix AZ 85023-

Purpose of Disbursement:
Payroll taxes less 25% federal

Category/
Type

Activity or Event Identifier:
ADMINISTRATION B 3

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

30062.78

Date M M / D D / Y Y Y Y
0 6 / 1 5 / 2 0 0 9

Transaction ID: H490720.E10281

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
202.67		762.42		965.09

B. Full Name (Last, First, Middle Initial)
BMS Payroll

Mailing Address

18441 N. 25th Ave Suite 103

City State Zip Code
Phoenix AZ 85023-

Purpose of Disbursement:
Payroll taxes 25% less federal

Category/
Type

Activity or Event Identifier:
ADMINISTRATION B 3

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

34400.98

Date M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: H490720.E10282

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
265.95		1000.46		1266.41

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
468.62		1762.88		2231.50

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT
2293.09		8626.30		10919.39